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Dated: July 23, 2007

Signature: 

Arnold H. Krumholz

Docket No.: SPINE 3.0-436 CIPCIPCON
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
James D. Ralph, et al

Allowed: March 19, 2007

Application No.: 10/725,305

Confirmation No.: 2899

Filed: December 1, 2003

Art Unit: 3738

For: INTERVERTEBRAL SPACER DEVICE
UTILIZING A SPIRALLY SLOTTED
BELLEVILLE WASHER HAVING
RADIALLY EXTENDING GROOVES

Examiner: B. E. Pellegrino

**PETITION TO WITHDRAW HOLDING OF
ABANDONMENT UNDER 37 C.F.R. 1.181 (a)**

MS Issue Fee
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Attorneys for the above-identified applicant received a Notice of Abandonment mailed July 12, 2007 for failure to timely pay the required issue fee. However, the transmittal form (PTOL-85) and facsimile transmission form were transmitted to the U.S. Patent and Trademark Office on June 13, 2007.

Attached hereto are copies of the PTOL-85 form and the facsimile transmission form as well as the PTO auto-reply facsimile transmission report indicating receipt on June 13, 2007 at 12:14:22 p.m. Additionally, the transmission form bears a Certificate of Facsimile transmission dated June 13, 2007.

Application No.: 10/725,305

Docket No.: SPINE 3.0-436 CPCPCON

It is therefore believed that evidence has been submitted to establish that the issue fee was timely paid and is therefore respectfully requested that a patent be granted on the above-identified application.

If there are any fees due in connection with this communication, please charge same to our Deposit Account No. 12-1095.

Dated: July 23, 2007

Respectfully submitted,

By 

Arnold H. Krumholz

Registration No.: 25,428

LERNER, DAVID, LITTENBERG,

KRUMHOLZ & MENTLIK, LLP

600 South Avenue West

Westfield, New Jersey 07090

(908) 654-5000

Attorney for Applicant

785558_1

Auto-reply fax to 9086547866 COMPANY:

Auto-Reply Facsimile Transmission



TO:

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Fax Information

Date Received:

Total Pages:

6/13/2007 12:14:22 PM [Eastern Daylight Time]
2 (including cover page)

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**FACSIMILE TRANSMISSION
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ATTORNEY DOCKET NO.: SPINE 3.0-436 CIP CIP CONT
APPLICATION NO.: 10/725,300
CONFIRMATION NO.: 2898
MAILING DATE OF NOTICE OF ALLOWANCE: March 19, 2007
FAX NUMBER: (571) 273-2885
PAGES INCLUDING COVER SHEET: 2
PLEASE ACKNOWLEDGE RECEIPT TO SENDER AT (908) 954-7866.

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Arnold H. Krumholz, Reg. No. 25,428
Typed or printed name of person signing Certificate

PAGE 12 * RCVD AT 6/13/2007 12:14:22 PM [Eastern Daylight Time] * BY: USPTO-2720F-31 * CDS:273285 * CSD:9086547866 * DURATION: 00:01:46



PTO/SB/97 (08-00)

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FACSIMILE TRANSMISSION

**ISSUE FEE TRANSMITTAL AND
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ATTORNEY DOCKET NO.: SPINE 3.0-436 CIP CIP CONT

APPLICATION NO.: 10/725,305

CONFIRMATION NO.: 2899

MAILING DATE OF NOTICE OF ALLOWANCE: March 19, 2007

FAX NUMBER: (571) 273-2885

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Signature

Arnold H. Krumholz; Reg. No. 25,428

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PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail** Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or **Fax** (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

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03/19/2007

SPINE MP
LERNER, DAVID, et al.
600 SOUTH AVENUE WEST
WESTFIELD, NJ 07090



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Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

(Depositor's name)
(Signature)
(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/725,305	12/01/2003	James D. Ralph	SPINE 3.0-436 CIP CIP CON 2899	

TITLE OF INVENTION: INTERVERTEBRAL SPACER DEVICE UTILIZING A SPIRALLY SLOTTED BELLEVILLE WASHER HAVING RADIALY EXTENDING GROOVES

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	06/19/2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
PELLEGRINO, BRIAN E	3738	623-017160

Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list:

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

LERNER, DAVID, LITTENBERG, KRUMHOLZ & MENTLIK, LLP

ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE: **SpineCore, Inc.**

(B) RESIDENCE: (CITY and STATE OR COUNTRY): **Summit, New Jersey**

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

a. The following fee(s) are submitted:

☒ Issue Fee

☒ Publication Fee (No small entity discount permitted)

☒ Advance Order - # of Copies **14**

4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)

☐ A check is enclosed.


☐ Payment by credit card. Form PTO-2038 is attached.

☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number **12-1095** (enclose an extra copy of this form).

Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature:  Date: **June 13, 2007**

Typed or printed name: **Arnold H. Krumholz** Registration No. **25,428**

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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